

ORIGINAL ARTICLE

Audit of Clinical Cases of Psychiatry for Last One Year

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MM; conceptualization of project, data collection, writing manuscript, statistical analysis, drafting, revision and final approval.

Submission completed: March, 2025

Review began: March, 2025

Review ended: April, 2025

Accepted: April, 2025

Published: June, 2025

Abstract

**Objective:** To see the frequency of different psychiatric diseases in our setup.

**Methodology:** A retrospective study is conducted in our private setup from 01-01-2024 to 31-12-2024 to see the frequency of psychiatric patients admissions. The data is categorized on the basis of OPD.

**Results;** The following results were obtained;

- Conversion Disorders (9)
- Schizophrenia (37)
- Substance use disorder (SUD) (60)
- Bipolar disorder (28)
- Attention Deficit / hyperactivity syndrome (ADHA) (10)
- Autism (8)
- Intellectual Disability (ID) (4)

**Conclusion:** There might be few reasons for disagreement from international figures e.g.

- Poverty in Pakistan
- Lack of knowledge about psychotic diseases
- Financial crises
- Early discharge of patients who have not recovered yet
- Family issues

**Keywords:** Conversion Disorders , Schizophrenia , substance use disorder (SUD), Bipolar disorder, Attention Deficit / hyperactivity syndrome (ADHA), Autism, Intellectual Disability

**Cite this Article as:** Mateen M., Audit of Clinical Cases of Psychiatry for Last One Year; SIAL J Med. Sci. June-2025 V-3 (Issue-04):18-21

Introduction

Karl Friedrich Cannstatt used 'psychosis' as a short form of "psychic neurosis" -a nervous system disease.

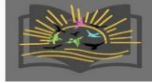
The Greek words "psyche" meaning the soul and "osis" meaning the abnormal condition, yielded in combination the word psychosis. So, the madness got the new term -psychosis- and debate started to see how many types/forms of this new disease did exist. According to WHO, the disturbance in individual's thinking, emotions

and behavior are disturbed, this is termed as mental disorders<sup>1</sup>. However, psychotic disorders are defined under the severe mental illness<sup>2</sup>.

In psychotic disorders, there is a loss of connection from the reality which causes a disruption in individual's functioning such as false thinking and false perception e.g. delusions or hallucinations<sup>3</sup>.

**Conversion disorder:** There is no mental illness but the patient has the clinical symptoms.

**Schizophrenia:** This is characterized by significant impairments in perception and changes in



behaviour. Symptoms may include persistent delusions, hallucinations, disorganized thinking, very high disorganized behaviour, or extreme agitation. People with schizophrenia may experience persistent difficulties with their cognitive functioning. Yet, a range of effective treatment options exist, including medication, psycho-education, family interventions, and psycho-social rehabilitation.

**Substance Use Disorder (SUD):** A condition in which there is uncontrolled use of a substance despite harmful consequences.

**Bipolar Disorder:** Bipolar disorders are mental health conditions characterized by periodic, intense emotional states affecting a person's mood, energy and ability to function. Patient experiences either manic episodes or depressive episodes at a time.<sup>3</sup>

**Attention Deficit/ Hyperactivity Syndrome:** ADHD affects 5-8% of children, mostly boys and often lasts in adulthood. ADHD affects a child's learning and their functioning in daily life. Main features of ADHD include Inattention (i.e. not being able to stay focused), Hyper-activity (i.e. excess movement not appropriate to the setting), Impulsivity (i.e. acting hastily).<sup>4</sup>

**Autism:** Autism spectrum disorders are characterized by some degree of difficulty with social interaction, communication, atypical patterns of activities and behaviors such as difficulty with transition from one activity to another.<sup>5</sup>

**Intellectual Disability:** Intellectual disability refers to neurodevelopmental conditions that affect functioning in two areas:

- Cognitive functioning such as learning problem solving and judgment.
- Adaptive functioning e.g. communication skill, social participation.<sup>6</sup>

**Objective:** To see the frequency of different psychiatric diseases in our setup.

## Methodology:

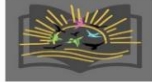
We saw cases of psychiatric disorder in our setup from 01-01-2024 to 31-12-2024. We categorized data on the basis of OPD.

Disorders	OPD	Indoor register	Total
Conversion Disorders	6	3	9
Schizophrenia	15	22	37
Substance use disorder (SUD)	40	20	60
Bipolar disorder	18	10	28
Attention Deficit / hyperactivity syndrome (ADHA)	10	No patient admitted	10
Autism	08	No patient admitted	8
Intellectual Disability (ID)	04	No patient admitted	4

Table No 1:

## Results:

Disorder	According to Socioeconomic Status	According to demography	According to prognosis	According to gender
Conversion Disorders	Upper Class: 00 Middle class: 19	Sialkot & Gujrat	All patients were discharged healthy	Male: 09 Female: 10
Schizophrenia	Upper Class: 61 Middle class: 10	Sialkot, Sambrial, Wazirabad & Gujranwala	Admitted: 29 Discharged: 21	Male: 45 Female: 44
Substance use disorder (SUD)	Upper Class: 50 Middle class: 22	Sialkot & Gujranwala	All patients were discharged healthy	Male: 44 Female: 38
Bipolar disorder	Upper Class: 51 Middle class: 00	Sialkot & Sambrial	Admitted: 18 Discharged: 08	Male: 26 Female: 25
Attention Deficit / hyperactivity syndrome (ADHD)	Upper Class: 00 Middle class: 00 Lower Class: 06	Sialkot		Male: 04 Female: 02
Autism	Upper Class: 00 Middle class: 00 Lower Class: 06	Sialkot		Male: 03 Female: 03



Intellectual Disability (ID)	Upper Class: 00 Middle class: 02	Sialkot		Male: 01 Female: 01
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**Discussion:**

Internationally 97 % patients were affected due to psychotic disorders.

In our study, 60% of the patients were affected due to psychotic disorders.

Out of total 156 patients who were included in this study in last 01 year dated 01-01-2024 to 31-12-2024. We found as follow:

- 09 patients presented with conversion disorder (5%)
- 37 patients presented with Schizophrenia (23%)
- 60 patients presented with substance use disorder (38%)
- 28 patients presented with bipolar disorder (17%)
- 10 patients presented with ADHD (6%)
- 8 patients presented with Autism (5%)
- 2 patients presented with Intellectual Disability (2%)

However, the study conducted on an international level from March 2017-April 2018 revealed the following results;

- 19 patients presented with conversion disorder (11%)
- 76 patients presented with Schizophrenia (24%)
- 20 patients presented with substance use disorder (4%)
- 21 patients presented with bipolar disorder (4%)
- 19 patients presented with ADHD (11%)
- 15 patients presented with Autism (8%)
- 16 patients presented with intellectual disability (9.76%)<sup>7</sup>

Our study coincides with the international study as far as schizophrenia is concerned. These

figures are also comparable with our study which is more or less similar in developing countries.

Overall, 32.2% (95%CI = 29.7-34.9) of patients with a substance-induced psychosis converted to either the bipolar or the schizophrenia-spectrum disorder.<sup>8</sup> Our study showed 38% substance addiction.

The pooled prevalence for the co-occurrence of psychosis in adults with autism was 9.4% (N= 63,675, 95%CI=7.52-11.72). The pooled prevalence for the co-occurrence of bipolar disorders in adults with autism was 7.5% (N= 31,739, 95% CI = 5.79-9.53).<sup>9</sup> Our study revealed the comparable results.

In 2019, 1 in every 8 people i.e. (970 million people around the world) were living with mental disorder with anxiety and depressive disorders. In 2020, the number of people living with anxiety and depressive disorders rose significantly because of the COVID-19 pandemic. Initial estimates show a 26% and 28% increase respectively for anxiety and major depressive disorders in just one year.<sup>10</sup> We conducted the study after passage of COVID-19 era.

**Conclusion:**

Mental disorders are frequent in the whole world. There might be few reasons for the differences in figures from international studies which may include:

- Poverty in Pakistan
- Lack of knowledge about psychotic diseases
- Financial crises
- Early discharge of patients who have not recovered yet
- Family issues

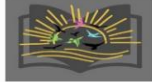
**Budget:** Nil

**Disclaimer:** None

**Conflict of Interest:** None

**Source of Funding:** None

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